

**TAROLLI, SUNDHEIM, COVELL, TUMMINO & SZABO**

1111 Leader Building  
526 Superior Avenue  
Cleveland, Ohio 44114

Phone (216)621-2234  
Facsimile (216)621-4072

1c558 U.S. PTO  
08/20/98  
Jc135 U.S. PTO  
09/13/35  
08/20/98

**PATENT**

Attorney Docket No.: A31-4000

Commissioner of Patents and Trademarks  
Washington, D.C. 20231

**NEW APPLICATION TRANSMITTAL**

Transmitted herewith for filing is the patent application of Inventor(s):  
1) Davison, Thomas W.; 2) Taylor, Timothy E.; and 3) Sher, Adam

For (title): **CANNULA FOR RECEIVING SURGICAL INSTRUMENTS**

**Enclosed are:**

**1. Papers Required for Filing Date Under 37 CFR 1.53(b):**

12 Pages of specification

1 Pages of Abstract

6 Pages of claims

2 Sheets of drawing

☒ formal

☐ informal

In addition to the above papers there is also attached: Information Disclosure Statement(2pgs), PTO Form 1449 and two(2) references.

**CERTIFICATION UNDER 37 CFR 1.10**

I hereby certify that this New Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service on this date August 20, 1998 in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number EE788626167US addressed to the: Commissioner of Patents and Trademarks, Washington, D.C. 20231

Teresa Ragone

(Type or print name of person mailing paper)

Teresa Ragone

(Signature of person mailing paper)

**2. Declaration or oath:**

- ☒ Enclosed      ☒ Executed      ☐ Not executed  
☐ Will follow.

**3. Language:**

- ☒ English  
☐ Non-English  
☐ A verified English translation of the  
    ☐ specification and claims  
    ☐ declaration  
is attached.

**4. Assignment:**

- ☒ An assignment of the invention to Endius Incorporated  
  
☒ is attached. Also PTO 1595 is attached.  
☐ will follow.

**5. Certified Copy:**

Certified copy(ies) of application(s)

(Country)	(appln. no.)	(filed)
(Country)	(appln. no.)	(filed)
(Country)	(appln. no.)	(filed)

from which priority is claimed

- ☐ is attached  
☐ will follow

**6. Fee Calculation:**

(Small Entity filing fee is 50% normal fee)

CLAIMS AS FILED			
Number Filed	Number Extra	Rate	Small Entity Basic Fee
			\$395.00
Total Claims	22 - 20 = 2	X \$11.00	\$22.00
Independent Claims	2 - 3 = 0	X \$41.00	0
Multiple dependent claim(s), if any		+	0

- ☐ Amendment canceling extra claims enclosed
- ☐ Amendment deleting multiple dependencies enclosed
- ☐ Fee for extra claims is not being paid at this time

Filing Fee Calculation \$417.00**7. Small Entity Statement:**

- ☒ Verified Statement that this is a filing by a small entity under 37 CFR 1.9 and 1.27

(Must be enclosed to get small entity filing fee reduction)

**8. Fee Payment Being Made At This Time:**

- ☒ basic filing fee \$417.00
- ☒ assignment recordal fee \$ 40.00
- ☐ for processing an application with a specification in non-English language \$\_\_\_\_\_

Total fees enclosed \$457.00**9. Method of Payment of Fees:**

- ☒ check in the amount of \$457.00 enclosed.
- ☒ The Commissioner is hereby authorized to charge any DEFICIENCY in the filing fees for this application to our Deposit Account No. 20-0090.

**10. Instruction As to Overpayment:**

- ☒ refund

TAROLLI, SUNDHEIM, COVELL,  
Tummino & SZABO  
1111 LEADER BUILDING  
526 SUPERIOR AVENUE  
CLEVELAND, OHIO 44114-1400  
Tel. No. (216)621-2234

James L. Tarolli  
SIGNATURE OF ATTORNEY  
James L. Tarolli  
REG. NO.  
36,029  
Type or print name of attorney

Express Mail Label #EE788626167US